

EDITORIAL

Heart: technology and guidelines

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See articles on pages 862 and 864

The greatest task before civilization at present is to make machines what they ought to be, the slaves, instead of the masters of men. — Havelock Ellis

Havelock Ellis never practised as a doctor, preferring to devote himself to the scientific study of sex. However, as a Victorian, he understood the need for us to master our machines, a sentiment that most cardiologists would readily subscribe to. Yet the task is daunting, and it is often difficult for us to keep abreast of the technologies that are now the major drivers of our specialty. Subspecialisation has, to some extent, protected us by reducing “need-to-know” to groups largely defined by tools of trade. However, subspecialties do not act in isolation and, as we have emphasised elsewhere, properly integrated care demands that we understand the clinical applications of these tools rather than rely on the hearsay of enthusiasts or those with conflicting interests.

In this issue of *Heart* appears the first in an occasional series of articles devoted to technology and guidelines. The guideline component was a late addition that emerged from editorial discussion partly because, like technology, it is an important driver of cardiological practice and also because we wanted to include within the series reports and commentaries of the technology appraisals by the National Institute for Health and Clinical Excellence (NICE). These appraisals

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are based on a detailed assessment of the evidence base and include cost-effectiveness calculations. NICE is also a major agency for guideline development and it was but a small step to collaborate with the *BMJ* by including these influential guidelines within our new series of articles.

The first article summarising the recently presented NICE guideline on management after the acute phase of myocardial infarction¹ (see page 862) appears with a commentary from representatives of the guideline development group (see page 864).² It will be the model for future guideline summaries from NICE. Next month a technological review of virtual histology as applied to the heart will appear,³ with further reviews of multi-slice CT angiography, cardiac MRI, gene therapy and molecular imaging in the pipeline. Interspersed amongst all the activity will be additional summaries of NICE technology assessment, which, like the guideline summaries, will be accompanied by expert commentary.

We believe the Technology and Guidelines series will be a valuable adjunct to the educational content of the journal and will help us enslave our cardiological machines in the manner of which Havelock Ellis would approve.

REFERENCE

- 1 Skinner JS, Cooper A, Feder GS, et al. Secondary prevention for patients following a myocardial infarction: summary of NICE guidance. *Heart* 2007;93:862–4.
- 2 Skinner JS, Minhas R. Commentary on NICE guidance for secondary prevention for patients following a myocardial infarction. *Heart* 2007;93:864–6.
- 3 König A, Klauss V. Virtual histology. *Heart*. Published Online First: 13 May 2007. doi: 10.1136/hrt.2007.116384.

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The Walter Somerville Award for Medical Writing

The British Cardiovascular Society and the Editorial Board of *Heart* are pleased to announce the competition for this annual award, which has been set up as a tribute to the late Walter Somerville in recognition of his 20-year editorship of the *British Heart Journal* and his enduring interest in the training and mentorship of junior doctors.

The competition is open to any doctor below the rank of consultant or Senior Lecturer and the award will be for the best review article on a clinical cardiovascular subject. The winner will be presented with a certificate at the Annual Scientific Conference and the review will be published. The competition will be judged by the Editor of *Heart* and the President of the British Cardiovascular Society, who reserve the right not to make the award if none of the entries meet the standard required for publication.

Applications, which must conform with the journal's requirements as published in Instructions to Authors (<http://heart.bmj.com/fora/>), together with a statement from the educational supervisor (or equivalent) confirming that the article is the un-assisted work of the candidate, should be submitted electronically (<http://submit-heart.bmj.com>) by 31 December 2007.